

Maternal and Child Health Priority Issue Brief

MCH Priorities

Adequate nutrition
and physical activity

Lifestyles free of
substance use and
addiction

Optimal mental
health and healthy
relationships

Health Disparities
(TBD)

Safe and healthy
communities

Healthy physical
growth and cognitive
development

Sexually responsible
and healthy
adolescents and
women

Access to preventive and treatment services

Quality screening,
identification,
intervention, and
care coordination

Access to Preventive and Treatment Services

Focus

This priority focuses on increasing access to preventive and treatment services for mothers and children. These services include primary care, well-child and well-woman care, prenatal care, care coordination within a medical home¹, dental care, mental health services, family planning, immunizations, and drug and alcohol use prevention and treatment.

Better access to these services leads to better health outcomes. For example, families who can easily get preventive health care services require fewer costly emergency services. Women who get adequate prenatal care give birth to healthier babies. To make it easier for families to get services, the Office of Maternal and Child Health (OMCH) works to improve provider-patient relationships and care coordination.

Objectives and Expectations

The objective of this priority is to increase the number of women, children, and families in Washington who receive preventive and treatment health services.

By promoting available, affordable, and accessible health services, we expect that:

- More women will get adequate prenatal care.
- More women, infants, and children will benefit from early identification and treatment of medical conditions.
- More women will get screened for and help with pregnancy risks including violence, substance abuse, tobacco, and HIV.
- More children and families will get recommended vaccines.
- More families will have health insurance and get appropriate and timely health care.
- More families will get better overall health care within a medical home.

¹The Medical Home is a model of primary health care that is accessible, family-centered, continuous, comprehensive, coordinated, compassionate, and culturally effective.

Key Data from Washington

Access to Prenatal and Postpartum Care

Data from the 2003 Pregnancy Risk Assessment Monitoring System (PRAMS) survey show that among women who did not get prenatal care in the first trimester, 35 percent of them could not get appointments and 30 percent of them did not have money or insurance to pay for appointments.ⁱ

In 2004, 64.3 percent of women receiving Medicaid received visits from a health care provider after the births of their babies. Nationally, only 55 percent of postpartum women receiving Medicaid received visits from health care providers.ⁱⁱ

Health Insurance

The percent of people in Washington with incomes below 100 percent of the federal poverty level (FPL) who did not have health insurance increased from 18 percent in 2002 to 23 percent in 2004. In addition, the number of people with incomes below 100 percent of the FPL increased substantially during this time period. The uninsured rate for those with incomes between 100 percent and 300 percent of the FPL stayed relatively stable between 2002 and 2004.ⁱⁱⁱ

Children with special health care needs are likely to lack health insurance coverage for the services they need to manage their condition.^{iv}

Access to Treatment Services

Results of the 2002 Washington State Behavioral Risk Factor Surveillance Survey (BRFSS) showed that 77 percent of adults in Washington have one primary medical provider. Among those with a single primary provider, 86 percent go to a doctor's office and 5 percent go to a public health or community clinic.^v

Access to Preventive Services

The National Immunization Survey provides estimates of vaccination rates among children aged 19-35 months. Washington's estimated immunization rate for the 4:3:1:3:3 series² was 75.3 percent^{vi} in 2003, the rate increased to 77.7 percent^{vii} in 2004.

Disparities

A recent three-year study found that children enrolled in Medicaid use fewer preventive services, more emergency services, and are more likely to be hospitalized and have more advanced conditions at the time of diagnosis than children not enrolled in Medicaid.ⁱⁱ

² The 4:3:1:3:3 series comprises ≥ 4 doses of diphtheria and tetanus toxoids and pertussis vaccine, diphtheria and tetanus toxoids, and diphtheria tetanus toxoids, and acellular pertussis (DTP/DT/DTaP) vaccine; ≥ 3 doses of poliovirus vaccine; ≥ 1 dose of measles-containing vaccine (MCV); ≥ 3 doses of *haemophilus influenzae* type B vaccine (Hib); and ≥ 3 doses of hepatitis B vaccine (hep B).

Activities

The Office of Maternal and Child Health (OMCH) works with other state agencies, local health jurisdictions (LHJs), universities, community based organizations, and other entities. Technical and financial support from OMCH contributes to the delivery of health care services, development of health education materials, collection of data, and the development of systems to improve public health. Activities promoting access to preventive and treatment services largely consist of infrastructure-building activities that increase access to and expansion of insurance coverage, improve care coordination, and promote best practices.

Listed below are some OMCH-supported activities related to promoting access to preventive and treatment services. The activities are categorized by what they primarily aim to influence: cost, availability, and access to health care.

Pregnant Women and Women of Childbearing Age

Affordable Health Care

- OMCH supports laboratory services for testing pregnant women for hepatitis B.

Available Health Care

- Local public health programs receive funding to support immunization programs and regional genetics clinics.
- The perinatal regional program works with the Department of Social and Health Services (DSHS) Health and Recovery Services Administration (HRSA). This collaboration includes contracts with selected health care facilities to improve pregnancy outcomes.
- The Perinatal Advisory Committee strives to improve relationships and communication between licensed midwives and obstetric care providers.

Access to Health Care

- The Family Health Hotline³ connects families to needed services.
- OMCH works with the Department of Social and Health Services (DSHS) Health and Recovery Services Administration (HRSA) to improve the referral system for Maternity Support Services (MSS), Infant Case Management, and family planning programs.
- OMCH contracts with private health care providers to improve the delivery of vaccines to children.
- Health and social services providers are educated about best practices for delivering genetic services.
- Proposed future accessibility activities include activities that strengthen linkages and referrals to mental health services.

³ The Family Health Hotline used to be known as the Healthy Mothers, Healthy Babies (HMHB) Hotline. The organization that operates the hotline recently changed its name from 'Healthy Mothers, Healthy Babies' to 'WithinReach: Essential Resources for Family Health' and it operates several other hotlines in addition to the Family Health Hotline.

Infants, Children, and Youth⁴

Affordable Health Care

- OMCH maintains a “last resort” fund for eligible families to pay for needed services not covered by other sources.
- All children in Washington State receive required vaccines at no cost from public and private health care providers.
- Local public health programs work with dental care providers within their communities to improve oral health.
- Washington’s universal distribution system for vaccines ensures that vaccines are available to all children aged birth - 18 years regardless of their ability to pay.

Available Health Care

- OMCH promotes medical homes⁵ to improve well-child and preventive care and to coordinate comprehensive care for children with special needs.
- OMCH identifies and maintains networks of nutritionists, feeding teams, maxillofacial review boards, and medical home teams.
- All infants born in Washington are screened for specific disorders including hearing loss and receive appropriate follow up.
- Newborn specialty clinics provide nutritional and other services to infants and children with disorders identified through newborn screening.
- OMCH provides support to the neurodevelopmental centers’ network.
- Local public health programs work with dental care providers to develop coalitions to increase the number of dentists who provide services to children, especially toddlers.
- Access to Baby and Child Dentistry (ABCD) programs operate throughout Washington with support from OMCH.
- Health care providers in King County receive training on giving treatment to children through the Kids Get Care program.
- Vaccines for required childhood immunizations are distributed throughout the state to local public health agencies and private health care providers at no cost to patients or providers.
- OMCH funds seven of the Regional Genetics Clinics and requires these clinics to serve all patients regardless of their ability to pay.

Access to Health Care

- MSS and Infant Case Management programs link patients to pediatric care and other needed services.
- CHILD Profile health promotion materials provide reminders and resources to parents of children aged birth - 6 years.
- Health and social services providers are educated about best practices for delivering genetic services.
- Local Children with Special Health Care Needs Coordinators link families to needed services.

⁴ Infants are defined as those who are aged birth to 1 year. Children are defined as those who are between 1 and 5 years old. Youth are those who are between 6 and 18 years old. Some activities target all ages or apply to families.

⁵ The Medical Home is a model of primary health care that is accessible, family-centered, continuous, comprehensive, coordinated, compassionate, and culturally effective.

- OMCH supports one school-based health clinic and three community-based family planning services agencies.
- OMCH funds a project at Children's Hospital and Regional Medical Center to help patients in Yakima receive genetic services from doctors in Seattle. The project uses videoconference to connect doctors and patients.
- OMCH monitors legislation regarding the age of consent for reproductive, mental health, and other health care services.
- Proposed future activities that will address access to health care include:
 - Integrating the medical home model to increase access to coordinated services for school-aged children and their families.
 - Using the Healthy Youth Survey and the Smile Survey to measure frequency of dental and well-child screenings.
 - Using the Department of Health Coordinated School Health Grant to explore access to school-based health services.

Families

Affordable Health Care

- OMCH supports community-based disability awareness programs that select and develop access initiatives.
- People who are not eligible for other financial assistance programs receive help to pay for tests that detect chromosomal defects linked to genetic diseases (cytogenetic testing).

Available Health Care

- OMCH coordinates participation in disability and health programs in five counties.

Access to Health Care

- Parent organizations distribute health and resource information to families.
- OMCH supports the development of community-based programs to improve access for persons with disabilities.
- Parents of children aged birth - 6 years receive CHILD Profile health promotion materials.

Research, Surveillance, and Best Practices

Data

- Medical home usage is measured through the National CSHCN Survey.
- Newborn screening surveillance and tracking data are collected to measure rates of specific disorders and success of follow up and treatment.
- The Smile Survey collects information about accessing oral health services throughout the state.
- Regional Genetics Clinics submit yearly data on the use of prenatal and clinical genetic services.
- Proposed future data and best practices activities include changing the data source for immunization rates to the CHILD Profile Immunization Registry.

Examples of Best Practices

- OMCH uses professional organization guidelines and policy statements regarding delivering genetic services such as those developed by the American College of Obstetricians and Gynecologists, the American College of Medical Genetics, and the Institute of Medicine to inform and educate health care providers.
- Hospital newborn screening and detection of hearing loss in infants.
- Protocols for children who are deaf or hard of hearing.
- Collaborative efforts to support early diagnosis and interventions identified by the Washington Integrated Services Enhancement (WISE) grant.
- Kids Get Care education curriculum for health care providers.
- The evaluation of immunization practices using Assessment Feedback Incentives and eXchange (AFIX) protocols and standards.

Other Public Health Agendas

By identifying promoting access to preventive and treatment services as a priority issue for OMCH, the office ensures that its work is consistent with the intent of the state performance measures defined in the Maternal and Child Health Title V Block Grant and other national and state public health agendas and that its work meets the needs of the people it serves. Healthy People 2010, the Public Health Improvement Plan (PHIP), the Washington State Department of Health Strategic Plan, and the Division of Community and Family Health Strategic Plan serve as guiding documents for Washington's public health system. Each of these emphasizes the importance of promoting access to preventive and treatment services in improving public health.

Healthy People 2010

Healthy People 2010 identifies ten leading health indicators^{viii} for high-priority public health issues. These indicators are used as the basis for public health priority-setting and decision-making. Related objectives will be used to measure the health of the nation over the next ten years. The leading health indicator related to OMCH's goal to promote access to preventive and treatment services is "Access to health care."

Some of the Healthy People 2010 objectives selected to measure progress for these indicators women and children are:⁶

- Increase the proportion of persons who have a specific source of ongoing care. (1-4)
- Increase the proportion of persons with health insurance. (1-1)
- Maintain vaccination coverage levels for children in licensed day care facilities and children in kindergarten through the first grade. (14-23)
- Increase the proportion of pregnant women who receive early and adequate prenatal care. (16-6)

Public Health Improvement Plan

The Washington State Public Health Improvement Plan (PHIP)^{ix} identifies five key determinants of health: environment, medical care, social circumstances, genetics, and behavior. The PHIP

⁶ The number in parentheses represents the objective number. Healthy People 2010 objectives are available in Healthy People 2010 Volumes I and II on-line at: <http://www.healthypeople.gov/Publications/>.

establishes 52 health status indicators under six broad areas. One of the categories contains indicators for access to health services. Indicators that measure access for the maternal and child population include the rates of vaccine-preventable diseases and the percent of households who are unable to obtain health care or are experiencing a delay or difficulty in obtaining health care.

Department of Health Strategic Plan

The Department of Health Strategic Plan^x created seven long-term goals for public health with related objectives and strategies. Goal 1 is to improve the health of all Washington State residents. The first objective for this goal is to demonstrate improvement of health status for the people in Washington State. The strategies for accomplishing this objective include integrating social determinants such as job opportunities, education, housing, and access to resources into the work of the department and using the PHIP key health indicators to guide decision-making. The second objective for this goal is to improve the quality of public health and health care services, which includes a strategy to assist communities in addressing access to care.

Community and Family Health Strategic Plan

The Division of Community and Family Health (CFH) within the Washington State Department of Health developed a strategic plan that describes the goals, objectives, and themes of the division's work for 2006-08. Six themes contribute to the goal of improving the health status of people in Washington State. CFH prioritized the "Improve healthy behaviors" and "Address health disparities" themes for the 2006-2008 timeframe. The maternal and child health priority of access to preventive and treatment services aligns with both of these themes and OMCH's activities are consistent with the division's strategies for achieving results.

Related Issues

Information about related issues can be found in this issue brief: Quality Screening, Identification, Intervention, and Care Coordination.

References

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- ⁱⁱⁱ Washington State Office of Financial Management. *2004 Washington State Population Survey, Research Brief 31*. “The Uninsured Population in Washington State.” February 2005. Website: <http://www.ofm.wa.gov/researchbriefs/brief031.pdf>
- ^{iv} Washington State Department of Health. *Health of Washington State, 2004 Supplement*. “Children with Special Healthcare Needs.” <http://www.doh.wa.gov/HWS/MCH2004.shtm>
- ^v 2002 Behavioral Risk Factor Surveillance System (BRFSS). Washington State Department of Health. Website: http://www.doh.wa.gov/EHSPHL/CHS/CHS-Data/brfss/brfss_homepage.htm
- ^{vi} CDC MMWR Weekly July 30, 2004/53 (29); 658-661 Website: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5329a3.htm>
- ^{vii} Data from CDC MMWR Weekly July 29, 2005/54 (29); 717-721 Website: <http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5429a1.htm>
- ^{viii} <http://www.healthypeople.gov/LHI/lhiwhat.htm>
- ^{ix} <http://www.doh.wa.gov/PHIP/default.htm>
- ^x http://www.doh.wa.gov/strategic/StratPlan03_05_ed1.pdf